

Substitute for form 1449/PTO			Complete if Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)			Application Number	10/501,187	
			Filing Date	January 8, 2003	
			First Named Inventor	Rhonda HANSEN	
			Art Unit	1635	
			Examiner Name	T. C. Gibbs	
Sheet	1	of	10	Attorney Docket Number	223002105200

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Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
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Examiner Signature	/Terra Cotta Gibbs/	Date Considered	02/07/2010
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NON PATENT LITERATURE DOCUMENTS			
Examiner Initials	Cite No.¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²

Examiner Signature	/Terra Cotta Gibbs/	Date Considered	07/16/2010
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